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Morning Briefing

Thursday, March 02, 2017

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From Kaiser Health News:

KAISER HEALTH NEWS ORIGINAL STORIES

1. Making Multiple Drugs In One Factory Risks Scary Side Effect Of Shortages

Hundreds of drug brands are being made in giant contract facilities. When a plant shuts down, a widespread drain on supply can result. (Sydney Lupkin, 3/2)

2. Patient Advocacy Groups Rake In Donations From Pharma

A new study shows that 83 percent of the largest patient advocacy groups take contributions from drug, medical device or biotech firms. (Emily Kopp, 3/1)

3. Spike In Syphilis Among Newborns Driven By Broader Epidemic

Sexually transmitted diseases are at an all-time high across the United States. Syphilis among

women and babies is a particularly serious problem in Louisiana, California and Georgia. (Anna Gorman, 3/2)

4. Lost In Translation: When Parents And Pediatricians Don't Speak The Same Language

Latino parents who speak only Spanish are less likely to report having satisfactory experiences with their children's doctors than Latino parents who speak English, a new California study shows. (Ana B. Ibarra, 3/2)

5. Faring Better Than Many ACA Insurers, Molina Backs Health Law 'Tuneup'

The health insurance company, which operates in 12 states plus Puerto Rico, grew out of a network of Southern California clinics founded in 1980. Molina's track record of working with low-income patients has served it well under Obamacare. (April Dembosky, KQED, 3/2)

6. Political Cartoon: 'Pass Up?'

Kaiser Health News provides a fresh take on health policy developments with "Political Cartoon: 'Pass Up?'" by Chip Bok.

Here's today's health policy haiku:

A DROP IN THE BUCKET

Health care tax credits
Never enough to cover
Real patients' care costs.

- Jennifer Bright

If you have a health policy haiku to share, please [Contact Us](#) and let us know if you want us to include your name. Keep in mind that we give extra points if you link back to a KHN original story.

Summaries Of The News:

HEALTH LAW

7. Trump's Nod Toward Tax Credits Does Little To Ease Intra-Party Tensions Over Repeal

How to help Americans afford health care is one of the most divisive parts of the Republicans' plan to dismantle and replace the health law. And, although President Donald Trump mentioned tax credits in his address to Congress on Tuesday, those who are in opposition to this approach don't see the battle as being over.

[The New York Times: Republican Unity On Health Care Is Elusive, Despite Trump's Support](#)

President Trump's address to Congress on Tuesday night buoyed House Republican leaders who were hopeful that his leadership would unite fractious lawmakers around a plan to replace the Affordable Care Act. But fundamental disagreements still divide Republicans on one of the central promises of their 2016 campaigns: repealing the health law. (Kaplan and Pear, 3/1)

[The Washington Post: Trump's Words On Obamacare Stir Up Intraparty Feud](#)

President Trump ascended the bulliest of pulpits Tuesday to address a joint session of Congress. It turns out it was his fellow Republicans who needed some bullying — specifically, on their plans to repeal and replace the Affordable Care Act. The leader of the Republican Party took some tentative steps in his address to the joint congressional session toward a position in the Obamacare fight looming over Capitol Hill. But the president's words sparked as much debate as they quashed. (DeBonis and Snell, 3/1)

[The Associated Press: Trump Speech Leaves GOP Encouraged, But Still Divided](#)

[Even] though Trump offered some specifics on health care and appeared to embrace a key element of a leadership-backed plan emerging in the House, his comments did little to settle an extremely difficult debate over Republicans' top legislative priority. Indeed, a day after the president called for "unity and strength," Republicans looked as divided as ever as they try to make good on seven years of promises to repeal and replace former President Barack Obama's health care law. Most said Trump's speech hadn't changed that or brought them much closer together. (Werner, 3/1)

[Los Angeles Times: Republicans Still Waiting For Trump To Take Charge On Obamacare And Taxes](#)

By now, Republicans in Congress thought they would be working closely with the White House on signature items of the GOP agenda — repealing and replacing Obamacare, overhauling the tax code. Many hoped President Trump would play the classic executive's role: Rolling up his sleeves to chart the direction, settle disputes and spend his political capital to bring wayward lawmakers in line. But instead, Trump has been reluctant to take charge of Republicans' policy priorities, and GOP lawmakers worry their early momentum is fading amid intraparty squabbles over legislation and Trump's tendency to flit from topic to topic when what they most need now is focus. (Mascaro, 3/2)

[Politico: No Breakthrough On Obamacare Repeal](#)

Senate Republicans aren't backing the latest House plan to repeal and replace Obamacare, saying they are reserving judgment until House leaders provide key details about the proposal they intend to advance as soon as next week. Top House Republican committee chairmen Kevin Brady and Greg Walden on Wednesday crossed the Capitol to rally support among their Senate counterparts for their bill but provided lawmakers with few details, such as a cost estimate, legislative language or policy details, even as they walked senators through the broad outlines of the plan. (Haberkorn, Everett and Cancryn, 3/1)

[The Wall Street Journal: House Republicans Confront A More Cautious Trump On Fiscal Policy](#)

There is the Republican president GOP lawmakers dreamily envisioned signing their legislation into law. And then there is President Donald Trump. Mr. Trump, who tore up modern political conventions during his tumultuous campaign, has turned out to be a more cautious figure in the White House—at least on fiscal policy—than are many congressional Republicans. For all the talk of Mr. Trump transforming government, it's the House Republicans who are willing to push for big, disruptive changes to federal safety-net programs, the tax code and the Affordable Care Act—and to take on the political risk that those changes would bring. Mr. Trump, by contrast, is treading more gingerly. (Peterson, 3/1)

[Atlanta Journal-Constitution: Republicans Make Big Push To Forge Final Health Care Deal](#)

Spurred on by President Donald Trump's latest call for action to repeal and replace the Obama

health law, Republicans accelerated their work on Wednesday in a push to forge a GOP health care agreement, but even with a new sense of urgency, Republican leaders still face divides in the Congress on several key issues that could imperil the effort. Let's take a look at some of the issues that are involved in GOP discussions. (Dupree, 3/2)

[CQ Roll Call: Senators Quiet After Briefing On Obamacare Replacement Plan](#)

More than a dozen Republican senators kept mum after a Wednesday closed-door briefing on a new House proposal to repeal and replace the 2010 health care law, with nearly all declining to either praise or critique the plan they were presented. The conference heard from House Ways and Means Chairman Kevin Brady of Texas and Energy and Commerce Chairman Greg Walden of Oregon, the two House leaders with jurisdiction over the measure. Several senators said the lawmakers outlined the broad strokes of what the House plans to do but did not share legislative text or summaries. Few senators commented. Most that did said only that the meeting was constructive. (Mershon, 3/1)

[The Hill: Rubio: Lack Of GOP Consensus On Healthcare Is Not A 'Weakness'](#)

Sen. Marco Rubio (R-Fla.) on Wednesday insisted that GOP lawmakers' competing opinions on potential ObamaCare replacement plans are not a cause for concern but rather a matter of "good public policy."...Republicans are scrambling to build consensus on how they will replace the Affordable Care Act. So far, myriad options have been floated, but no singular plan has been put forward by the party. The lack of consensus has made it difficult to repeal former President Obama's signature healthcare law after Republicans campaigned on a pledge to repeal and replace it. President Trump said earlier this month that a replacement plan would come in "a couple of weeks," but no plan has been proposed yet. (Greenwood, 3/1)

8. Republicans Fiercely Guarding New Draft Of Repeal Plan

The leaders are trying to avoid a repeat of a draft being leaked. Meanwhile, House lawmakers are expected to vote on a repeal bill next week.

[Bloomberg: Republicans Hide New Obamacare Draft Under Shroud Of Secrecy](#)

House Republican leaders have a new version of their major Obamacare repeal and replacement bill. They just don't want you to see it. The document is being treated a bit like a top-secret surveillance intercept. It is expected to be available to members and staffers on the House Energy and Commerce panel starting Thursday, but only in a dedicated reading room, one Republican lawmaker and a committee aide said. Nobody will be given copies to take with them. The unusual secrecy is a reflection of the sensitivity -- and the stakes -- surrounding the GOP effort to rewrite the Affordable Care Act, a top priority of President Donald Trump, who has yet to offer his own plan. (House and John, 3/1)

[Morning Consult: House Panel to Mark Up Obamacare Repeal Bill Next Week, Trump Ally Says](#)

A House panel is expected to vote next week on legislation that would gut the Affordable Care Act, a key congressional ally of President Donald Trump told reporters on Wednesday. Rep. Chris Collins, a New York Republican, said a draft bill to repeal and begin replacing Obamacare would likely be made available to members of the House Energy and Commerce health subcommittee for review on Thursday. A subcommittee mark-up is expected to be held next week. (Reid, 3/1)

[The Hill: House Panel To Markup ObamaCare Repeal Bill Next Week, Lawmaker Says](#)

The House Energy and Commerce Committee plans to hold a markup on ObamaCare repeal and replace legislation next week, according to panel member Rep. Chris Collins (R-N.Y.). Collins said that lawmakers on the Health subcommittee, such as himself, will be able to read a copy of the bill this Thursday and provide feedback. Asked if the markup is coming next week, Collins said, "That's our plan, plans do change." (Sullivan, 3/1)

9. Kentucky A Messaging Battleground In War Over Health Care

The state has been held up as an example of how the Affordable Care Act should work. But the new governor says it shows how the law can fail. These very different visions were under the national spotlight Tuesday when former Gov. Steve Beshear offered the Democrats' rebuttal to the president's speech to Congress. Meanwhile, lawmakers in Indiana are warning about the pitfalls of repeal. "It's reality hitting home," GOP Senate leader David Long said.

[The Associated Press: Current, Ex-Kentucky Governors Battle Over Health Law Legacy](#)

As Republicans in Congress prepare to repeal and replace former President Barack Obama's health care law, Kentucky's current governor and his predecessor are wrestling over the law's legacy - and both sides claim the state as a case study of the law's impact. Former Democratic Gov. Steve Beshear embraced the Affordable Care Act, expanding Kentucky's Medicaid program and setting up a state-run health insurance exchange. But Matt Bevin, Beshear's Republican successor, quickly dismantled the state exchange and has applied for a waiver to overhaul Medicaid with the goal of moving people off the publicly-funded program and onto private insurance plans. (3/1)

[The Associated Press: Republicans In Pence's Indiana Warn Of Health Repeal Fallout](#)

Republican legislative leaders in Indiana are warning that repealing the Affordable Care Act could unravel a program for poor residents that Vice President Mike Pence implemented as governor, a conservative blueprint for expanding Medicaid under the federal law. Indiana House Speaker Brian Bosma and GOP Senate leader David Long both said this week that tens of thousands of poor people could lose their insurance if Republicans in Washington enact some of the ideas they're discussing for repealing President Barack Obama's signature health care law. (3/1)

[Marketplace: How A Republican Plan To Shrink Medicaid Could Hurt Red States](#)

Top Republicans – including President Donald Trump – have been huddling today to discuss ways to repeal and replace Obamacare. No doubt one item is on the agenda — shrinking Medicaid, the health program that serves 70 million Americans, people with disabilities, the elderly and those with low incomes. ... Republicans have long believed Medicaid costs too much. And it's true, the program grows faster than the national economy, and it's always one of the most expensive line items for states. The thinking, said [Lanhee] Chen, is that belt tightening will help states do more with less. "For states, sometimes when they have this fiscal pressure, it allows them to streamline the program, it allows them make their program more responsive. But I don't think anyone should make the claim that it's going to be easy for states," Chen said. (Gorenstein, 3/1)

And in other news —

[Winston-Salem Journal: Cooper Budget Pushes For Medicaid Expansion, Opioid Addiction Treatment Services](#)

Expanding the state's Medicaid program in 2018-19 and providing more funding to address the state's opioid crisis are among the top priorities of Gov. Roy Cooper's budget when it comes to health care. The budgets for the next two fiscal years, unveiled Wednesday, would provide a \$3.76 million Medicaid rebase adjustment for 2017-18 and a \$112.6 million adjustment for 2018-19. (Craver, 3/1)

[Dallas Morning News: Texas Brings 'Disadvantages' To Debate Of Federal Medicaid Spending Caps, Study Warns](#)

For years, Texas GOP leaders have said they'd gladly give up open-ended flows of federal Medicaid money for a set "block grant" that lets them run the health insurance program for the poor the way they want. ... Block grants and per capita caps, though, would be a high-stakes roll of the dice for

Texas, a new private study has warned. "Capped Medicaid financing shifts the risk of any costs above the federal caps to the states," said the study, conducted by Washington, D.C.-based Manatt Health for the Texas Alliance for Health Care. It is a year-old coalition of health care providers, insurers, business groups and patient advocates. (Garrett, 3/1)

[Arkansas News: Arkansas House OKs Bill To Halt Medicaid Expansion Enrollment](#)

The measure would require the state Department of Human Services to seek a federal waiver or waivers allowing it to stop enrolling people in the program known as Arkansas Works, formerly the private option, on July 1. The program, Arkansas' alternative to the expansion of Medicaid rolls envisioned in the federal Affordable Care Act, provides government-subsidized private health insurance, mostly funded by the federal government, to Arkansans earning up to 138 percent of the federal poverty level. (Lyon, 3/1)

[Arkansas Online: House OKs Freeze On Medicaid Expansion](#)

The House on Wednesday voted to halt enrollment into the Arkansas Works program after a debate about what the federal government is likely to do to change health care policy. House Bill 1465 by Rep. Josh Miller, R-Heber Springs, passed 55-32. It heads to the Senate for further consideration. (Fanney, 3/2)

[Indianapolis Star: MDwise To Pull Out Of Medicaid Program, Lay Off 80](#)

MDwise, an Indiana health insurer, has announced it will lay off about 80 employees because it is pulling out of an insurance program the state designed to care for some of its sickest and poorest residents. The company made the decision to leave the Hoosier Care Connect program at the end of this month because of a dispute with the Indiana Family and Social Services Administration over payment, company officials said in a statement. (Rudavsky, 3/1)

10. Selling Insurance Across State Lines Relies On Faulty Premise, Experts Say

Although the idea is appealing to Americans who favor market competition, when it comes to health insurance that competition really needs to be happening among hospitals and doctors. In other health law news: a Tennessee town is left with no options; repeal could be a boon for tax dodgers; community clinics worry about funding; the vice president is headed to Ohio to talk health; and more.

[The Associated Press: Trump Idea To Expand Health Care Competition Faces Hurdles](#)

Allowing insurers to market health care policies across state lines is one of President Donald Trump's main ideas for bringing down costs. While supporters of the idea cast it as a way to make insurance policies more competitive, critics say it's unlikely to result in more affordable plans and could undermine stronger consumer protections in states such as California and Hawaii. Such a "race to the bottom" could leave some older consumers with health problems unable to afford coverage. (3/1)

Previous KHN coverage: [Sounds Like A Good Idea? Selling Insurance Across State Lines](#)

[Stat: In A Tennessee Town With Few Obamacare Options, People Worry](#)

Knoxville is in trouble — for many, saving the ACA refers to saving the insurance marketplace — and this city of 183,000 is fresh out of options. Two weeks ago, Humana became the latest insurer to pull out of Obamacare insurance exchanges by 2018. In Tennessee, Humana's exit will affect nearly 80,000 people, including those who bought insurance from Humana after UnitedHealthcare and Blue Cross Blue Shield of Tennessee backed out of most of the state's largest metro markets. Metro Knoxville, with a population of more than 800,000, is bearing the brunt of Humana's departure: 40,000 residents may have no other insurance option come 2018. (Blau, 3/1)

[Politico Pro: Tennessee Becomes Exhibit A In GOP's Obamacare Repeal Push](#)

When Republicans make the case that Obamacare is collapsing, they point to Tennessee. The most recent sign: Humana's decision to drop out of Obamacare markets for 2018 means residents of 16 counties around Knoxville could have zero options for purchasing individual coverage when the next open enrollment period begins in November. (Demko, 3/1)

[Politico: Tax Dodgers Could Be Winners Under ACA Repeal](#)

Tax dodgers could end up winners under Republicans' bid to repeal the Affordable Care Act. One of the Obamacare tax provisions now at risk of being killed by lawmakers is aimed at cracking down on tax shelters. Known among experts as the "economic substance doctrine," it targets sham transactions used by businesses and wealthy individuals to avoid paying taxes. (Faler, 3/1)

[Modern Healthcare: Facing ACA Repeal, Community Clinics Are Looking Down A Double-Barreled Gun](#)

Much of Mountain [Comprehensive Health Corp.'s] growth occurred through the Affordable Care Act, which funneled funding to grants aimed solely at helping community health centers provide services not traditionally covered by third-party payers. Between 2011 and 2015, local clinics across the country received \$11 billion in Section 330 grants through an ACA provision called the Community Health Center Fund. Congress extended the funding in 2015, providing \$7.2 billion over the next two years. But the fund is set to expire in September, and its future is in doubt. Community health center operators are fairly confident lawmakers will re-authorize the fund because their work has consistently received bipartisan support. Plus, Congress has already extended the fund twice. (Johnson, 3/1)

[The Associated Press: Vice President Pence To Talk Health Care In Ohio](#)

Vice President Mike Pence is expected to discuss efforts to repeal the health care overhaul during a visit to Ohio. The former governor of neighboring Indiana on Thursday is scheduled to visit Frame USA, which sells American-made picture frames from its home base in a northern Cincinnati suburb. (3/2)

[New Hampshire Public Radio: With Health Care Reform On Horizon, Assessing Obamacare's Impact On N.H.](#)

For the vast majority of New Hampshire residents, the Affordable Care Act had little impact on health care choice. That's because most people in the state obtain their coverage through their employer (61%), or through government-run programs like Medicare and Medicaid (27%). However, for people who buy their own health insurance, the ability to choose a plan was severely limited when the Affordable Care Act launched in 2014. (Bookman, 3/1)

[Kaiser Health News: Faring Better Than Many ACA Insurers, Molina Backs Health Law 'Tuneup'](#)

Some large health insurance companies have suffered losses under the Affordable Care Act, leading to a few high-profile exits from the online marketplaces. Humana is just the latest, announcing in January that it will stop offering health insurance on the ACA health exchanges at year's end. But the administrators of a smaller, California-based insurer — Molina Healthcare — managed to turn a modest profit in the early years of the 2010 health law and break even in 2016. How did they do it? (Dembosky, 3/2)

11. Lower-Income Americans Would Receive Less Financial Help To Buy Insurance Under GOP Replacement Plan, Analysis Says

As Republicans coalesce around a plan to dismantle the health law and replace it with a system that relies more on tax credits, an analysis by the Kaiser Family Foundation finds that people with low- or moderate-incomes would get less financial assistance than they do currently. (KHN is an editorially

independent program of the foundation.)

[The Hill: Study Finds GOP Plans Give Low-Income People Less Help Than ObamaCare](#)

A new study finds that financial assistance under proposed Republican replacement plans would provide significantly less help for low-income people than under ObamaCare. The study from the Kaiser Family Foundation finds that the average tax credit to help people buy insurance would be at least 36 percent lower in 2020 under Republican replacement plans than under the Affordable Care Act. (Sullivan, 3/1)

[McClatchy: Reports: GOP Obamacare Replacement Plans Provide Less Financial Assistance](#)

As congressional Republicans move to solidify their Obamacare repeal-and-replace legislation, concern is mounting that their strategies will leave millions of Americans with less financial assistance and more expensive coverage. A new analysis on Wednesday from the Kaiser Family Foundation projects that the HealthCare.gov insurance marketplace's average premium subsidy – which people use to help purchase coverage – would shrink by at least 36 percent in 2020 under GOP proposals being considered. (Pugh, 3/1)

ADMINISTRATION NEWS

12. Former Health Policy Adviser For Pence Tapped For CMS Position

Brian Neale worked with both Seema Verma -- the Trump administration's nominee to head the Centers for Medicare & Medicaid Services -- and Vice President Mike Pence to create the Healthy Indiana Plan, the state's Medicaid expansion plan also known as known as HIP 2.0. Meanwhile, the Senate continues to consider Verma's nomination.

[Modern Healthcare: Trump Chooses Pence Ally To Lead Medicaid](#)

Brian Neale has been tapped by the Donald Trump administration as the new director of the Center for Medicaid and CHIP Services, according to the agency's former director Cindy Mann. He will report to Seema Verma, Trump's pick for CMS administrator once she is confirmed by the Senate. Neale didn't immediately return a request for comment on his new appointment. Neale most recently was executive director at the United States Congress Joint Economic Committee and served as healthcare policy director for Vice President Mike Pence when he was Indiana governor. He worked with both Verma and Pence to create the Healthy Indiana Plan, the state's Medicaid expansion plan also known as known as HIP 2.0. (Dickson, 3/1)

[Bloomberg: Trump CMS Pick Gets Second Vote After Tie At Senate Committee](#)

The Senate Finance Committee will vote again Thursday on President Donald Trump's nominee to head U.S. health programs for the elderly, poor, and disabled after an initial tally resulted in a tie. Members present Wednesday voted 9 to 9 on whether to send the nomination of Seema Verma to the full Senate for confirmation as head of the Centers for Medicare and Medicaid Services. The Senate Finance Committee will reconvene on Thursday, said Chairman Orrin Hatch, a Republican from Utah. (Greifeld, 3/1)

MARKETPLACE

13. Other States Watch Closely As Vermont Implements Ambitious 'Pay For Performance' Plan

The concept of paying doctors and hospitals based on how well they care for their patients and

contain costs isn't new, but no one has tried it on a scale of this size before.

[Stateline: Health Care Experiment Aims For Healthier Patients, Lower Costs](#)

Traditionally, doctors and hospitals are paid for each procedure, treatment or test they provide. But critics say this "fee for service" system drives up costs and harms patients by pushing providers to do as much as possible, regardless of whether it benefits patients. Under Vermont's plan, to be phased in through 2022, health plans would pay doctors and hospitals based on how well they care for their patients and contain costs, rather than on the volume of services they provide. ... Other states will be watching closely. Studies of smaller pay-for-performance experiments have yielded mixed results in patients' health outcomes. And in an urban area with competing insurers and hospitals, it would be more difficult to coordinate a pay-for-performance system than it is in Vermont. Nevertheless, if Vermont's plan is successful it is likely that others will duplicate it. (Ollove, 3/2)

Related KHN Coverage: [Liberal Vermont Tests The Waters On GOP Health Care Overhaul](#)

PHARMACEUTICALS

14. When The Patient Voice Is Speaking With A Pharma Accent

A new study finds that 80 percent of patient advocacy groups get money from the industry. "I think that is not well known — I think that is a shock," says Dr. Ezekiel J. Emanuel, one of the study's authors.

[The New York Times: More Than 80 Percent Of Patient Groups Accept Drug Industry Funds, Study Shows](#)

The nation's largest patient advocacy groups are on the front lines of some of the biggest health care debates, from the soaring costs of prescription drugs to whether new medicines are being approved quickly enough. But while their voices carry weight because they represent the interests of sick patients, a new study has found that more than 80 percent of them accept funding from drug and medical-device companies. (Thomas, 3/1)

[Kaiser Health News: Patient Advocacy Groups Rake In Donations From Pharma](#)

High-profile advocacy groups for patients with cancer, Alzheimer's, HIV and other diseases almost always accept funding from pharmaceutical firms, and many fail to report any contributions, new research shows. At least 83 percent of the nation's 104 largest patient advocacy groups take contributions from the drug, medical device and biotech industries, raising questions about whether they consistently put patients first, according to a paper published Wednesday in the New England Journal of Medicine. (Kopp, 3/1)

15. After Patients' Deaths, Company Pumps Brakes On Cutting Edge Cancer Treatment

Juno Therapeutics is shifting its focus, but will be playing from behind in a hot field after having to abandon the treatment.

[Stat: Juno Pulls The Plug On A Once-Promising Cancer Treatment](#)

Juno Therapeutics is abandoning a cancer therapy that once looked like a revolutionary advance, reacting to a rash of patient deaths that made the customized treatment too risky to push forward. ... Juno's treatment, called JCAR015, was tied to five deaths in clinical trials on a rare form of leukemia, leading the Food and Drug Administration to twice suspend development in 2016. In each

case, Juno's therapy triggered a storm of immune activity that led to deadly brain swelling, a side effect the company struggled to explain. (Garde, 3/1)

In other pharmaceutical news —

[Reuters: EpiPen Maker Mylan Forecasts Strong 2017; Shares Jump](#)

EpiPen allergy shot maker Mylan NV forecast 2017 profit and revenue largely above analysts' estimates on Wednesday, in sharp contrast to downbeat expectations from its rivals, amid pricing pressure in the U.S. generics market. The generic drugmaker also reported better-than-expected fourth-quarter profit and revenue, boosted by strong demand for drugs acquired through its purchase of Sweden's Meda last year. (Grover, 3/1)

[Kaiser Health News: Making Multiple Drugs In One Factory Risks Scary Side Effect Of Shortages](#)

A shift toward making multiple medications under one roof is sparking concern about what happens when a facility suddenly shuts down because of a manufacturing or safety issue: Closing a single factory could lead to shortages of hundreds of drugs, say regulators and industry analysts. Their anxiety is complicated by the tight secrecy surrounding where pharmaceuticals are made, so even experts aren't certain where or how a supply problem has occurred. (Lupkin, 3/2)

WOMEN'S HEALTH

16. Failure Rates For Contraception Falling

It's not clear what the reason for the better rates are, but the study's author suggests major public health efforts in recent years to improve public knowledge about contraception may have helped.

[NPR: Birth Control Failure Is Dropping, CDC Says](#)

If you're failing less, then you're succeeding more, right? That's exactly what appears to be happening with birth control in the United States, according to a new study released by the Guttmacher Institute. Contraceptive failure rates for all of the most common contraceptives (think: the pill, condoms, and IUDs) fell from 2006-2010, according to the most recent data collected for the Center for Disease Control and Prevention's National Survey of Family Growth. (McCammon, 3/1)

In other women's health news —

[Milwaukee Journal Sentinel: Women Urge 'Sister Pact' For Mammograms In Seven Milwaukee ZIP Codes](#)

[Lisa] Taylor-Goodwin is part of a targeted ad campaign unveiled Wednesday by the Wisconsin Breast Cancer Task Force to encourage African-American women to get mammograms... Called "Sister Pact," the four-month advertising campaign features photos of African-American women with a friend or family member who made a pact to be screened for breast cancer. The photos are featured on billboards and buses and in digital and print advertising; the campaign also includes radio and television spots. (Jones, 3/1)

[Texas Tribune: Bush Daughter Emphasizes Planned Parenthood's Importance Under Trump](#)

At a Planned Parenthood fundraiser in Fort Worth on Wednesday, Barbara Pierce Bush, the daughter of former President George W. Bush, insisted that the work the organization is doing is especially important after a changing of the guard in Washington. Bush was the keynote speaker at Planned Parenthood of Greater Texas' annual Fort Worth luncheon. In audio of her speech obtained by The Texas Tribune, Bush hinted that President Donald Trump's electoral victory over Hillary Clinton caught her by surprise. (Samuels, 3/1)

PUBLIC HEALTH AND EDUCATION

17. Facebook To Bolster Its Suicide Prevention Tools

In response to recent episodes in which deeply troubling moments play out in real time, this social media platform hopes to play a role in curbing suicide attempts.

[The Washington Post: Facebook Hopes Artificial Intelligence Can Curb The ‘Terribly Tragic’ Trend Of Suicides](#)

Just like that, Naika Venant was live. The 14-year-old girl was on Facebook, broadcasting from a bathroom at her foster home in southeastern Florida. Then, she was hanging from a scarf tied to a shower’s glass door frame — a deeply painful and personal moment playing out publicly on social media. A friend saw the video stream on Facebook Live and called 911, but officers were sent to the wrong address. By the time they got to the foster home in Miami Gardens, it was too late: Naika had committed suicide. (Bever, 3/1)

[San Jose Mercury News: Facebook Adds Suicide-Prevention Tools For Live Video And Messenger](#)
Facebook wants to help prevent suicide in real time as live video and messaging grow in popularity. On Wednesday, the tech firm announced new tools so users can report a video in which someone is live-streaming a suicide attempt or self-injury. Users will also be able to reach out to the person directly, and Facebook says the person streaming the video will see options to contact a help line, reach out to a friend or view tips. (Wong, 3/1)

18. Opioid State Of Emergency Declared In Maryland In Face Of Growing Number Of Fatal Overdoses

Gov. Larry Hogan announces that the state will spend \$10 million a year on prevention and treatment services as well as increased law enforcement efforts. And news outlets report on other stories on the epidemic from Pennsylvania and Virginia.

[The Washington Post: Maryland Governor Declares State Of Emergency For Opioid Crisis](#)

Maryland Gov. Larry Hogan on Wednesday escalated his administration’s response to the opioid-addiction crisis, declaring a state of emergency and committing an additional \$50 million over the next five years to beef up enforcement, prevention and treatment services. Hogan (R) signed an executive order calling for the state of emergency, an instrument many jurisdictions use to coordinate anti-opioid and heroin strategies. The action fulfills a campaign promise he made in 2014 but temporarily shelved after taking office in favor of other legislative and executive initiatives. (Turque, 3/1)

[The Baltimore Sun: Hogan Declares Emergency, Announces New Funding To Fight Drug Overdoses](#)

Amid mounting overdose deaths, Gov. Larry Hogan pledged Wednesday to spend an extra \$10 million a year to battle Maryland’s problem with heroin and prescription pill abuse. The Republican governor also declared a state of emergency because of the epidemic, which officials believe led to some 2,000 overdose deaths last year...Hogan said the emergency declaration would allow authorities across the state to “cut through the red tape” while the extra money would give teams more flexibility to address what he called “the rapid escalation of the heroin and opioid crisis in our state.” (Ian Duncan, 3/1)

[The Philadelphia Inquirer: Teamsters Go After Drug Wholesaler AmerisourceBergen After Opioid](#)

Crisis Hits Their Homes

Newly focused on an issue that is ravaging its members, the International Brotherhood of Teamsters on Thursday plans to challenge one of the world's biggest pharmaceutical wholesalers, demanding that AmerisourceBergen Corp. investigate its own sales practices and potential supply chain diversions, and factor compliance into its executives' pay. The Chesterbrook-based company, ranked 12th by revenue on the Fortune 500, is holding its annual shareholder meeting in Philadelphia, and the union pension and benefits funds own an undisclosed share. But any shareholder can attend the closed meeting. Representatives said they will question the board and hold an afternoon rally outside. (Sapatin, 3/1)

Richmond Times-Dispatch: Former Midlothian Physician Convicted Of Writing 52 Bogus Prescriptions For Highly Addictive Opioids

A former Midlothian physician was convicted Wednesday of writing 52 prescriptions over 1½ years for highly addictive opioid drugs in a fraud scheme that involved six accomplices and netted the doctor a cut of the narcotics. Dr. Kyle Douglas Compton, 40, whose license to practice has been suspended, issued unlawful prescriptions from his former home-based practice in Midlothian to people not under his care between Dec. 1, 2013, and May 31, 2015. All of the prescriptions were for hydrocodone or oxycodone, two highly addictive opioid drugs used for pain relief. (Bowes, 3/1)

19. Breakthrough Opens Possibility Of Cryogenically Preserving Organs

Before, researchers always had to contend with damage from re-warming frozen organs. In other public health news: sickle cell disease; bird flu; embryo research; syphilis; eczema; and bone marrow.

Stat: Cryogenic Researchers See 'Road Ahead' To Unfreeze Organs

If scientists are to ever perfect the science of cryopreserving organs, they will have to succeed not only at protecting them at frigid temperatures, but also at bringing them back from their deep freeze. With current warming methods, even small tissues tend to crack or crystallize as they are warmed, leaving them useless. On Wednesday, however, researchers announced they had devised a technology that could rewarm larger pieces of tissue without major damage, paving the way for future studies that could demonstrate whether the method could be used to one day store organs for transplants. (Joseph, 3/1)

Stat: One Boy's Cure Raises Hopes And Questions About Gene Therapy For Sickle Cell Disease

A closely watched study using gene therapy to treat sickle cell disease cured one patient, a boy in France, researchers reported on Wednesday, a glimmer of hope for a long-neglected disease but one that comes with several caveats. Results from the clinical trial, which is sponsored by Cambridge, Mass.-based Bluebird Bio, have been dribbling out at scientific meetings and in company announcements since soon after the boy received the gene therapy, in October 2014, when he was 13. The new paper, in the New England Journal of Medicine, provides a "deeper view" of the patient's disease and recovery, said Bluebird CEO Nick Leschly. "It's a bit of a megaphone, allowing us to say that gene therapy might lead to a dramatic outcome." (Begley, 3/1)

The New York Times: China's Bird Flu Surge Is A Low Epidemic Threat, W.H.O. Says

Although there has been a surge in human infections with H7N9 avian flu in China this winter, the risk of an epidemic remains low, a World Health Organization official said on Wednesday. But the virus — which has killed about a third of the people known to have caught it — has now split into two distinct strains. (McNeil, 3/1)

Stat: US Says Bird Flu Vaccine Doesn't Provide Adequate Protection

With human infections from a bird flu virus surging in China, US officials charged with preparing the

country for influenza pandemics have been assessing the state of an emergency stockpile of vaccines against that strain. The conclusion: The stored H7N9 vaccine doesn't adequately protect against a new branch of this virus family, and a new vaccine is needed. Rick Bright, who heads the Biomedical Advanced Research and Development Authority, or BARDA, said the H7N9 vaccine in the stockpile would not fend off a new family of these viruses that has emerged in China, known as the eastern or Yangtze River Delta lineage of the viruses. (Branswell, 3/1)

[NPR: Human 'Embryoids' And Other Embryo Research Raises Concern](#)

[Ali Brivanlou's] lab and one other discovered how to keep human embryos alive in lab dishes longer than ever before — at least 14 days. That's triggered an international debate about a long-standing convention (one that's legally binding in some countries, though not in the U.S.) that prohibits studying human embryos that have developed beyond the two-week stage. (Stein, 3/2)

[Kaiser Health News: Spike In Syphilis Among Newborns Driven By Broader Epidemic](#)

Neonatologist Gurvir Khurana had only read about it in textbooks. Seeing it in real life has been a shock: baby after baby born severely anemic, lungs filled with fluid, bodies covered with rashes. Some only lived minutes; others died within days or weeks. The cause: congenital syphilis. (Gorman, 3/2)

[NPR: Relief From Itchy Eczema May Come In The Form Of A Shot](#)

People with moderate to severe eczema may benefit from new treatments that significantly reduce the intense itching that comes with the scaly skin disease. A study published Wednesday finds that the antibody nemolizumab, given as a monthly injection, not only reduces itching significantly but also clears up many of the patches of dry, inflamed skin that are part of the disease. It appears in the New England Journal of Medicine. (3/1)

[The Baltimore Sun: Patient's Own Bone Marrow Used To Treat Heart Failure](#)

Johns Hopkins Medicine doctors have treated the first person in a key phase of a clinical trial where a high dose of the patient's own bone marrow cells was used to treat heart failure after a heart attack. The dose was directed precisely at the point of dysfunction in the heart in the hope that it will stimulate the body's natural healing process. The Hopkins patient was the first to receive what is called the CardiAMP therapy as part of the third phase of a trial taking place at 40 medical centers across the country. Once phase three trials show a treatment works well, doctors can apply for approval with the Food and Drug Administration. (McDaniels, 2/28)

STATE WATCH

[20. State Highlights: Calif. To Step Up Scrutiny Of Hospitals With High Rates Of Patient Infections; Fla. Lawmakers Poised Take On Hospital Deregulation, Funding](#)

Outlets report on news from California, Florida, Kansas, Texas, Pennsylvania, Michigan, Illinois, Iowa and Georgia.

[Los Angeles Times: State To Step Up Inspections At Hospitals With High Infection Rates](#)

After complaints that the state is doing little to stop deadly hospital outbreaks, the California Department of Public Health said this week that it would prioritize inspections at those facilities with high rates of patient infections. The state disclosed the changes in a Tuesday letter to Consumers Union. The national nonprofit group had filed a petition with the state early this year listing scores of hospitals with abnormally high infection rates that had not been inspected in five years. (Petersen, 3/1)

[Tampa Bay Times: For A Better Florida: Florida Lawmakers To Tackle Medical Marijuana, Hospital Funding](#)

The Florida Legislature stands poised to address some hot-button issues in health care this session, including hospital deregulation and funding... In November, more than 70 percent of voters approved a constitutional amendment allowing people with "debilitating medical conditions" to use medical marijuana as prescribed by a doctor. Before then, only cancer patients and people with intractable seizures could use the drug legally. (McGrory, 3/1)

[Health News Florida: Results Mixed In States That Stopped Requiring Approval For New Hospitals](#)

When officials at Nemours Children' Hospital in Orlando tried to establish a pediatric heart transplant center they learned how restricting a state law regulating the opening of new health facilities can be. The so-called certificate of need regulations have come under fire from legislators who want to improve competition in the health care industry. The rules forced the hospital to prove that the state needed a fifth heart transplant center. (Ochoa, 3/1)

[KCUR: Kansas Nursing Home A Model For Cutting Antipsychotic Use Among Dementia Patients](#)

Kansas continues to rank among the worst states when it comes to sedating nursing home residents with powerful antipsychotic drugs. Janell Wohler and Kate Rieth of the Linn Community Nursing Home told their colleagues Tuesday that it doesn't have to be that way. Wohler is the administrator and Rieth is the director of nursing at the facility, which has eliminated off-label use of antipsychotics for residents over the last five years. Rieth said it's a matter of educating staff to look for the underlying reasons behind residents' non-compliant behavior and addressing those, rather than reaching for a phone to call a doctor who can prescribe a "chemical restraint." (Marso, 3/1)

[KCUR: Missouri Lawmakers Debate Whether Pregnancy Resource Centers Must Provide Science-Backed Information](#)

You don't have to drive far in Missouri to see billboards offering help to pregnant women. They're part of the state's Alternatives to Abortion program, which has seen a big increase in public funding in recent years. This year's legislative debate on the program focuses on a new question: What kind of information should these centers provide to women?...The Alternatives to Abortion program does not require centers to have medically trained staff or provide medically accurate information. And a 2012 survey by the abortion rights group NARAL found that many of the centers in the St. Louis area provided inaccurate or misleading information about the risks of abortions. (Smith, 3/2)

[Texas Tribune: Texas House, Senate Unanimously Pass Measures Overhauling Child Welfare System](#)

Texas legislators from both chambers unanimously passed bills on Wednesday that would change how the Texas Department of Family and Protective Services cares for vulnerable children. The simultaneous debates in both chambers came as advocates have pushed for months for lawmakers to take drastic measures to fix the state's broken child welfare system. Gov. Greg Abbott announced the issue as one of four emergency items during his State of the State address in January. (Evans, 3/1)

[Los Angeles Times: L.A. Keeps Building Near Freeways, Even Though Living There Makes People Sick](#)

For more than a decade, California air quality officials have warned against building homes within 500 feet of freeways. And with good reason: People there suffer higher rates of asthma, heart attacks, strokes, lung cancer and pre-term births. Recent research has added more health risks to the list, including childhood obesity, autism and dementia. (Barboza and Shleuss, 3/2)

[The Philadelphia Inquirer: Public To Pay: In Biggest Insurer Failure Ever, Pa. Liquidates \\$4.6B Long-Term-Care Firm](#)

After eight years of legal struggle among state regulators, investors, and policyholders, Commonwealth Court Judge Hannah Leavitt signed off on a plan Wednesday to liquidate Penn Treaty Network America Insurance Co. and its affiliate, American Network Insurance Co. of Allentown. The decision leaves solvent insurers, their owners, and customers to pick up the cost for more than 70 percent of the up to \$4.6 billion in projected long-term-care claims expected for 76,000 aging Penn Treaty customers nationwide. (DiStefano, 3/1)

[Detroit Free Press: Bonus, Pay Surpasses \\$10M For Blue Cross CEO; Some Rates Could Dip](#)
Blue Cross Blue Shield of Michigan's chief executive saw his bonus jump last year as the health insurance giant saw better financial results and is now planning to lower rates for its small businesses coverage. Total compensation for Daniel Loepp, CEO of Blue Cross since 2006, hit \$10.9 million in 2016, up from \$9 million in 2015. His specific compensation was \$1.5 million in base salary, \$8.3 million in bonuses and \$1 million in "other" compensation, such as car allowance and life insurance, company officials said. (Reindl, 3/1)

[San Francisco Chronicle: California Health Officials Fire Contractor In HIV Drug Program](#)
The California Department of Public Health fired an out-of-state contractor Wednesday that had taken over part of a program designed to help people pay for HIV drugs, months after advocacy groups complained that management problems were interfering with patients' access to life-saving medications. The abrupt ouster of the state's contract with Michigan-based A.J. Boggs surprised patient advocates, many of whom learned about the change on a state conference call Wednesday morning. A termination letter was sent to A.J. Boggs just before the meeting. (Allday, 3/1)

[Austin \(Texas\) American-Statesman: Family Of Toddler Who Died During Dentist Procedure Files Wrongful Death Lawsuit](#)

The parents of a 14-month-old girl who died during a dental procedure last year have filed a wrongful death lawsuit, claiming the procedure was unnecessary and an attempt to "line the pockets" of Austin Children's Dentistry with Medicaid funds. ... According to the suit filed in Travis County district court Tuesday, Torres was taken to the dentist to have two cavities filled by Michael Melanson. ... "After (Torres) was under, Melanson came out and indicated to her mother that for Daisy's well-being, he needed to perform multiple pulpotomies, or baby root canals, and then place crowns on four of her eight total teeth — baby teeth," the suit said. According to the document, Melanson told Squire the procedure was normal and necessary, then went back into the room. ... The suit alleges that Torres' procedure was only done because it was covered by Medicaid, and that no sign of disease was evident in dental radiographs taken on the day Torres died. (Wilson, 3/1)

[KVUE \(Austin, Texas\): Parents Of Toddler Who Died During Dentist Visit File Wrongful Death Lawsuit](#)

Attorney Sean Breen is representing the family and said that the suit serves two purposes. One, to be a voice for Daisy Lynn and two, to get others to pay attention to what he calls a "problem." "The problem is that around the country, Dentists and dental clinics are committing fraud - Medicaid fraud. They're doing procedures that aren't necessary and they're collecting money from it. Not everyone dies from that, but Daisy Lynne Torres did." ... Austin Children Dentistry's attorney said they are aware of the lawsuit, but will not comment on pending litigation. (3/1)

[Texas Tribune: Lawmaker Wants To Give Texas Psychologists Power To Write Prescriptions](#)

State Rep. Dustin Burrows, R-Lubbock, said his bill aims to address the state's shortage of psychiatrists, currently the only mental health doctors allowed prescription privileges. House Bill 593 would grant psychologists a prescriptive authority certificate, but only after they've been supervised for a year by a licensed physician and completed a postdoctoral training program in psychopharmacology, among other requirements. (Samuels, 3/2)

[Chicago Tribune: Moeller Overseeing Hearing On Changes To In-Home Care For Seniors](#)

In her role chairing the House Aging Committee, State Rep. Anna Moeller (D-Elgin) will be overseeing a hearing March 9 on a proposal that would change the mechanism through which thousands of Illinois senior citizens receive home care. The plan put forward would create a two-tiered system out of the current Illinois Department on Aging's Community Care Program, which is designed to help seniors stay living in their own homes as long as they can. (Danahey, 3/1)

[Texas Tribune: Businesses Line Up Against Dan Patrick's High-Priority Insurance Bill](#)

Major business interests are lining up against one of Lt. Gov. Dan Patrick's top priorities — a bill that would make it harder for Texans to force their insurance companies to pay up when calamity strikes. Patrick and his allies say the bill, Senate Bill 10, is needed to stop greedy trial lawyers from cashing in on hail damage lawsuits. But the word "hail" doesn't appear anywhere in the legislation, and this week businesses ranging from 7-Eleven to Ryan LLC — founded and led by Republican mega-donor Brint Ryan — conveyed their deep opposition to it in a letter sent to Patrick and other top Republican leaders. (Root, 3/1)

[Iowa Public Radio: GOP Bill To Help Entrepreneurial Physicians Stalls](#)

Governor Branstad's goal to open up more competition in the health care industry ran into some serious trouble at the statehouse Wednesday. A bill to clear the way for more for-profit health care facilities failed to clear a Republican-dominated panel. The governor wanted to do away with the state's Certificate of Need program that requires new health care facilities to prove there's a need for their services. (Russell, 3/1)

[Atlanta Journal Constitution: Georgia House Passes Medical Marijuana Expansion](#)

The state House on Wednesday backed a much broader expansion of Georgia's medical marijuana law, a statement vote after the Senate backed a similar measure that left many advocates unhappy. House Bill 65, sponsored by state Rep. Allen Peake, R-Macon, would among other changes double the list of illnesses and conditions eligible for treatment with medical marijuana in Georgia to include AIDS, Alzheimer's disease, autism, autoimmune disease, epidermolysis bullosa, HIV, peripheral neuropathy and Tourette's syndrome. (Torres, 3/1)

WEEKEND READING

[21. Longer Looks: John Oliver; Replacing Obamacare; And Birth Control In The Military](#)

Each week, KHN's Shefali Luthra finds interesting reads from around the Web.

[HBO: Obamacare: Last Week Tonight With John Oliver](#)

Congressional Republicans could soon vote to repeal Obamacare. John Oliver explores why their replacement plans are similar to a thong. (2/26)

[The Atlantic: The Five Biggest Hurdles For Republicans Replacing Obamacare](#)

For Republicans seeking an Obamacare replacement now, the challenge is growing with each passing day. Re-energized Democrats are defending the ACA with a ferocity unseen in past years, and new polls show that the law is becoming more popular than ever before. (Russell Berman, 2/27)

[Vox: Interview: Former Gov. Steve Beshear Explains How He Sold Deep-Red Kentucky On Obamacare](#)

Democrats have selected former Kentucky Gov. Steve Beshear to deliver the party's response to President Donald Trump's congressional address on Tuesday. Beshear bolstered his national reputation by implementing Obamacare in an especially conservative area. Under the health law,

Kentucky's uninsured rate has fallen from 20 percent to 7.5 percent — the largest drop in the country. (Sarah Kliff and Byrd Pinkerton, 2/27)

[FiveThirtyEight: Republican Health Plans Have Winners And Losers, Just Like Obamacare](#)

Last week, Republican members of the House put forward the outline of a replacement plan for the Affordable Care Act, President Barack Obama's signature health care bill. The ACA was decried by Republicans as an unmitigated financial disaster and touted by Democrats as a resounding success at providing coverage to the uninsured. But like any health policy, it required tradeoffs, and the Republican plans to replace the ACA are no different. (Anna Maria Barry-Jester, 2/23)

[The New Yorker: Trumpcare Vs. Obamacare](#)

The pitchforks are changing hands. In 2009, it was Democratic members of Congress supporting health-care reform who were set upon by outraged constituents. When they passed the Affordable Care Act anyway, it cost their party control of Congress in the 2010 midterm elections. House Republicans subsequently voted more than fifty times to repeal or cripple the A.C.A. Nineteen Republican-led states spurned the offer of federal funds to expand Medicaid coverage. In January, Donald Trump's first act as President was to order government agencies to avoid implementing, as much as is legally possible, what has become known as Obamacare. (Atul Gawande, 2/25)

[Vox: I'm Witnessing The Near Defeat Of AIDS In Africa. But I Fear What Comes Next.](#)

Ending the epidemic will require us to reach people who have not yet benefited from lifesaving prevention and treatment. That will mean President Donald Trump will need to reinforce the US commitment to its AIDS relief program, the President's Emergency Plan for AIDS Relief (PEPFAR). As Bill Frist, a former Republican Senate majority leader, recently highlighted in the New York Times, PEPFAR is Trump's opportunity to contribute to the goal of an AIDS-free generation. (Elizabeth Radin, 2/25)

[The Atlantic: The Challenge Of Accessing Birth Control In The Military](#)

While she was deployed in Somalia and Iraq as a colonel in the army, Elspeth Cameron Ritchie handled her period with limited privacy, often in isolated or flooded bathrooms for five tours, sometimes as the only woman in her unit. It was "difficult and sticky and kind of embarrassing," she says. (Leslie Nemo, 2/23)

[Modern Healthcare: C-Suite Gender Gap: Leadership Training Efforts Falling Short](#)

This inequality at the C-suite level has gotten the attention of those healthcare organizations that are striving to improve the diversity of their leadership teams. Their efforts are helping women advance further along in their careers. But societal stereotypes and cultural norms continue to remain stubborn barriers standing in the way of faster progress, experts say. ...Increasingly, healthcare organizations have recognized that a diverse executive team leads to better performance and improved outcomes because innovative ideas are brought to the table. Yet, women are often passed up for leadership roles despite the fact that they dominate the healthcare industry for entry level and lower management positions. (Maria Castelluci, 2/25)

EDITORIALS AND OPINIONS

22. Perspectives On Public Health

A selection of opinions from around the country.

[RealClear Health: Congress, Please Make Smoking Less Harmful.](#)

Legislation introduced recently by Reps. Tom Cole, R-Okla., and Sanford Bishop, D-Ga., would

make significant changes to the way the Food and Drug Administration regulates tobacco and nicotine products. These changes should be welcomed as a necessary corrective. If the purpose of tobacco control is to reduce tobacco-related addiction, illness and death, the FDA's current regulatory process may be off course. (Joel Nitzkin, 3/2)

[WBUR: The Big Problem With Oprah And Other Celebs Who Tout Diets](#)

I've been trying to bite my tongue about Oprah's new cookbook, I really have. Who am I to judge one of America's wealthiest women for sharing her weight-loss secrets and her favorite Weight Watchers-friendly recipes? Who am I to question if one of the most famous "yo-yo" dieters in dieting history has made peace with food or has simply managed to call a truce? Actually, who I am — a psychotherapist specializing in eating disorders — is exactly why I've got a problem with Oprah and every other celebrity who celebrates dieting. Because of who I am, I'm painfully aware of the downside of doing as celebrity diet proponents say, but not necessarily as they do. (Jean Fain, 3/1)

[Los Angeles Times: Don't Reopen Aliso Canyon](#)

I'm no longer surprised when my nose suddenly starts to bleed. As a resident of Porter Ranch, I've become accustomed to unexpected nosebleeds, nausea and headaches— near daily reminders of the area's toxic environment. Porter Ranch sits below Aliso Canyon, the source of the largest gas leak and methane release in United States history. In October 2015, one of the facility's 115 aging gas injection wells "blew out," spewing methane (a potent greenhouse gas), benzene (a carcinogen) and many other toxic emissions. (Hibino, 3/1)

[The Des Moines Register: Businesses Look To Shift Cost Of Workplace Injuries To You](#)

Business and insurance interests are trying to wipe out insurance benefits that cover every working Iowan. Workers' compensation is a required employee benefit. It covers medical treatment, lost wages and compensation to workers injured on the job. At least that's what it's supposed to do. (Saffin Parrish-Sams, 3/1)

23. Viewpoints: The GOP's Disparate Strategies To Repeal, Replace And Repair The Health law

Opinion writers offer their thoughts and advice regarding how to move forward on health policy in terms of the Affordable Care Act as well as Medicaid and Medicare.

[Bloomberg: What Trump Should Do First To Protect Health Care](#)

Confronted with the rising popularity of the Affordable Care Act, the White House, Congress and Republican governors are grappling with disparate strategies to repeal, replace or repair it. The confusion is increasingly disruptive to the individual insurance business, which has come to rely on Obamacare subsidies and rules. During this period of uncertainty, the Trump administration needs to ensure there's a working system in place when future policy is finally decided. (3/1)

[The Wall Street Journal: How Trumpism Can Bust The Medical Trusts](#)

President Trump in recent days has declared ObamaCare a "disaster" and suggested "nobody knew that health care could be so complicated." Yet more than a month after taking the oath of office he still hasn't announced a detailed plan to repeal and replace the Affordable Care Act. During his address Tuesday night to a joint session of Congress Mr. Trump stuck mostly to standard Republican talking points. Which raises a question: What would a truly populist approach to health-care reform look like? (Clark Havighurst, 3/1)

[Bloomberg: Trump Speech Leaves Health Care A Big Mess](#)

The health-care goals President Donald Trump mentioned in his address to a joint session of Congress Tuesday night were a high-water mark for policy specificity from this president. But that

mark was a low bar. The lack of detail was still glaring, and Trump either skirted the alligators lurking in the morass of Affordable Care Act repeal and replacement, or just poked them with a long stick. The process remains as chaotic as ever. That's a threat to health insurers who focus narrowly on government programs. It may also hurt those who don't. (Max Nisen, 3/1)

[The New York Times: Trump Picks A Side: How Tax Credits Would Work In A G.O.P. Health Plan](#)

In a speech thin on policy specifics Tuesday, President Trump did mention one wonky term worth watching: tax credits. He outlined a five-point plan for health reform that was largely aspirational, and probably consistent with the goals of nearly every Republican listening. But the issue of tax credits is actually an important dividing line in the Republican caucus. And it represents a break from Mr. Trump's own position during the campaign. (Margot Sanger-Katz, 3/1)

[The Washington Post: Republican Health Plans Could Have Devastating Consequences For Your Teeth](#)

In January, Vadim Kondratyuk, a 26-year-old truck driver from California, died suddenly after harmful bacteria from a cavity spread to his lungs. He left behind a wife and two daughters. Cavities are a serious but overlooked problem in the United States. About half of all children have cavities, making them the country's most common childhood disease. Unfortunately, health proposals under consideration by the Trump administration and Republican leaders in Congress could make the situation worse, with devastating consequences for millions of poor Americans. (Donald L. Chi, 3/1)

[AL.com: Medicare Is A Promise That Must Be Kept](#)

Proposals in Congress to turn Medicare into a voucher system would take health care in precisely the wrong direction - pushing up costs for current and future retirees, and eroding protections that Americans have earned through many years of hard work and taxes. Yet, in a short-sighted attempt to save money, vouchers are now being promoted on Capitol Hill as an answer to rising costs. (Candi Williams, 2/28)

[Raleigh \(N.C.\) News & Observer: Thanks, Lyndon, I'm 64 And Knocking On Medicare's Door](#)

Medicare has been a literal lifesaver for tens of millions of Americans, who might have died from a lack of medical care or fallen into dire poverty without it. With Social Security as another safety net (first payments made in 1940), the plain truth is that people are alive today, with a measure (however small) of security and safety they wouldn't have otherwise. ... I don't care for the views of steely-eyed "reformers" like House Speaker Paul Ryan, the young man from Wisconsin who appears to flirt with reforming Medicare and Social Security, "entitlement programs" they're called, in the name of balanced budgets. We hear of phrases like "privatization," or "raising ages," or "reducing benefits" so as to "preserve" these programs. (Jim Jenkins, 3/1)

[St. Louis Post-Dispatch: Medicaid Block Grants Would Be A Disaster. One Missouri Senator Can't Wait](#)

House Speaker Paul Ryan, R-Wis., long has wanted to change the way the federal government allocates money to Medicaid, the federal-state health program for children, the disabled, the poor and nursing home patients. Instead of paying for everyone who's eligible, Ryan wants to give states block grants and let politicians decide how to spend them. Now that there's a Republican in the White House — albeit one whose latest promise is to leave Medicaid and Social Security alone — Ryan's block grant idea is getting some serious attention. It's a terrible idea that would wreak havoc on millions of Americans. (3/1)

[JAMA Forum: Politics, Policy, And Medicaid Reform](#)

In a recent JAMA Forum, the authors discuss the Republican rationale for Medicaid reform, 2 specific Republican proposals, and some policy implications that result from these proposals. Although I agree with much of the analysis, it ignores a key difference between how Medicaid is nominally structured versus how it has actually been operating over the past several decades. An

awareness of this difference may provide a more complete understanding of why Republicans seek to reform Medicaid through block grants. (Gail Wilensky, 3/1)

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